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June 24, 2005

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Brenda O. Holmes
FROM

6559
REFERENCE NO

29
PAGES (WITH COVER)

44471/266545
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COMMENTS

Applicant: Motoi SATO et al.
Title: Scheme for Presenting Recommended Items Through
Network Based on Access Log and User Preference
Serial No./Docket No.: 09/997,502 44471/266545
Filed: 11/20/2001

PAPERS SUBMITTED:

1. PTO/SB/21 - Transmittal form;
2. PTO/SB/06 - Patent Application Fee Determination Record;
3. PTO/SB/22 - Petition for Extension of Time;
4. PTO-2038 - Credit Card Payment form; and
5. First Response in Application to non-final Office Action of January 26, 2005

Date: June 24, 2005

By: Brenda O. Holmes, Reg. No. 40,339

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PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/997,502
	Filing Date	11/20/2001
	First Named Inventor	Motoi SATO et al.
	Art Unit	3627
	Examiner Name	James A. Kramer
Total Number of Pages in This Submission	Attorney Docket Number	44471/266545

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) PTO/SB/06 Fee Determination Record; and 2) PTO-2038 Credit Card Payment form.
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	KILPATRICK STOCKTON LLP		
Signature	<i>Brenda O. Holmes</i>		
Printed name	Brenda O. Holmes		
Date	06.24.2005	Reg. No.	40,339

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO's Centralized Facsimile Number (703) 872.9308 on the date shown below.			
Signature	<i>Janie Wilkins</i>		
Typed or printed name	Janie Wilkins	Date	6/24/2005

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